	PATENT			December			ON RECOI	RD	6	09/	61	5,40	67
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
F	OR		NUMBE	R FILED	N	UMBER	EXTRA	RAT	ΕĪ	FEE	7	RATE	FEE
BASIC FEE										345.00	OR		690.00
TO	TOTAL CLAIMS			30 minus 20=		. 19		X\$ 9			OR	X\$18=	130
NDEPENDENT CLAIMS 5 minus 3 =					3 = :	: 2			_		OR	X78=	15%
MI	JLTIPLE DEPE	NDENT C	LAIM PR	ESENT				+130	_	-	1	+260=	108
If the difference in column 1 is less than zero, enter "0" in column 2							TOTA			OR OR	L	1/12/	
CLAIMS AS AMENDED - PART II								1017	Ľ		JOH	OTHER	THAN
	Ţ	(Colu	mn 1)		(Colu	ımn 2)	(Column 3)	SMAI	L E	NTITY	OR	SMALL	
AMENDMENT A		CLA REMA AFT AMENO	ER		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONA FEE
2	Total	. 5	3	Minus	<u>" \</u>	30	=23	X\$ 9	=		OR	X\$18=	414
AME	Independent	<u>ි</u> ර	,	Minus	<u> </u>	5	=	X39=	.	\neg	OR	X78=	
_	FIRST PRESE	ENTATION	1 OF MU	LTIPLE DEI	PENDEN	IT CLAIM		+130:	<u> </u>	-	OR	+260=	7.1
								TOT		 	اہرا	TOTAL	1/4.0
		(Colui	mn 1)		(Colu	ımn 2)	(Column 3)	ADDIT. F	EE L		,	ADDIT. FEE	, ,
AMENUMENT B		CLA REMA AFT AMENO	INING		PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONA FEE
	Total	٠		Minus			=	X\$ 9=	:		OR	X\$18=	
4 2 1	Independent	·		Minus	•••		-	X39=			OR	X78=	
_	FIRST PRESE	NIAHON	1 OF MUI	LTIPLE DEI	PENDEN	T CLAIM		+130=	.		OR	+260=	
								TOT.		•	OR	TOTAL	
		(Colur			· (Colu	mn 2)	(Column 3)	TOTA ADDIT. FE		•	OR	TOTAL ADDIT. FEE	
		(Colur CLAI REMAI AFT AMEND	IMS INING ER		HIGI NUN PREVI	mn 2) HEST IBER OUSLY FOR	(Column 3) PRESENT EXTRA		T	ADDI- IONAL FEE	OR		TIONA
	Total	CLAI REMAI AFT	IMS INING ER IMENT	Minus	HIGI NUN PREVI	HEST MBER OUSLY	PRESENT	ADDIT. FE	T			ADDIT. FEE	
	Independent	CLAI REMAI AFT AMEND	IMS INING ER IMENT	Minus	HIGI NUM PREVI PAID	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE X\$ 9=	T	IONAL	OR	RATE X\$18=	TIONA
		CLAI REMAI AFT AMEND	IMS INING ER IMENT	Minus	HIGI NUM PREVI PAID	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE X\$ 9=	T	IONAL		RATE X\$18= X78=	TIONA
- AMENDIMENI C	Independent	CLAI REMAI AFT AMEND	IMS INING ER IMENT	Minus TIPLE DEF	HIGH NUM PREVI PAID 	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE X\$ 9=	T	IONAL FEE	OR	RATE X\$18=	ADDI- TIONAL FEE

FORM PTO-875 (Rev. 12/99)

Palent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number